2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008337

FILED Apr 18, 2009 Secretary of State

Entity Name: FAITH ASSEMBLY MINISTRIES INTERNATIONAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 9608 NW 80TH STREET 8810 PARADISE COURT TAMARAC,, FL 33321 TAMARAC,, FL 33321 **Current Mailing Address: New Mailing Address:** 9608 NW 80TH STREET 8810 PARADISE COURT TAMARAC,, FL 33321 TAMARAC,, FL 33321 FEI Number: 74-3133057 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GUTZMER, SELVIN DR. GUTZMER, SELVIN DR 8810 PARÁDISE COURT 9608 NW 80TH STREET TAMARAC, FLORIDA, FL 33321 US US TAMARAC, FLORIDA, FL 33321 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: 04/18/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete GUTZMER, SELVIN DR. GUTZMER, SELVIN DR. Name: Name: 9608 NW 80TH STREET Address: 8810 PARADISE COURT Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321 Title: () Delete Title: () Change () Addition SMITH, JOSLYN Name: Name: Address: 9230 NW 32 MNR Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: Title: TREA () Delete Title: () Change () Addition SMITH, CARMEN Name: Name: 9230 NW 32 MNR Address: Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: Title: MEM () Delete Title: () Change () Addition Name: SMITH, VERONICA Name: Address: 11158 NW 34TH COURT Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: Title: () Delete Title: MEM (X) Change () Addition GUTZMER, FRAULINE REV GUTZMER, FRAULINE REV Name: Name: 9608 NW 80TH STREET 8810 PARADISE COURT Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEON P. BRYAN D 04/18/2009